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Nan Russell	(Depositor's name)
non Russell	(Signature)
25 September 2008	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/551,100	09/26/2005	Vidar Snekkenes	128.1198USN	1645

TITLE OF INVENTION: IMPREGNATION OF CHIPS WITH AN ACID LIQUID PRIOR TO A SULPHATE PULPING PROCESS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	12/17/2008
EXAM	INER	ART UNIT	CLASS-SUBCLASS]		
CALANDRA,	ANTHONY J	1791	162-041000	•		
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		(2) the name of a single registered attorney or a	3 registered patent attornively, e firm (having as a memb agent) and the names of ur trieys or agents. If no nam	era 2	asth LAW OFFICES	

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Metso Fiber Karlstad AB

Karlstad, SWEDEN

Please check the appropriate assignee category or categories (will	not be printed on the patent): 🔲 Individual 🕱 Corporation or other private group, entity 🗀 Government
4a. The following fee(s) are submitted: X Issue Fce Publication Fee (No small entity discount permitted)	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached.
Advance Order - # of Copies	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 060243 (enclose an extra copy of this form).

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/rfasth/ 25 September 2008 Authorized Signature Rolf Fasth 36,999 Typed or printed name Registration No.

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